2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N02000000301

Entity Name: RESOURCES FOR WOMEN, INCORPORATED

Current Principal Place of Business:

1801 S. NOVA RD.
SUITE 104
S. DAYTONA, FL 32119

New Principal Place of Business:

Current Mailing Address:

1801 S. NOVA RD.
SUITE 104
SOUTH DAYTONA, FL 32119

New Mailing Address:

1801 S. NOVA RD.
SUITE 104
S. DAYTONA, FL 32119

FEI Number: 75-2996613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHUMAKER, JOYCE EX. DIR
1801 S. NOVA RD.
SUITE 104
S. DAYTONA, FL 32119 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHUMAKER, JOYCE
Address: 109 ASHBY COVE LANE
City-St-Zip: NEW SMYRNA BCH, FL 32168

Title: VD ( ) Delete
Name: HEILAND, MELISSA
Address: 341 GLEN CLUB DRIVE
City-St-Zip: DEBARY, FL 32713

Title: SD ( ) Delete
Name: BONILLA, ALLISON
Address: 508 BLOSSOOMWOOD DR.
City-St-Zip: DEBARY, FL 32713

Title: D ( ) Delete
Name: WEIGAND, FRED
Address: 2670 DOYLE RD.
City-St-Zip: DELTONA, FL 32738

Title: D (X) Delete
Name: GREEN, GARTH
Address: 125 N. GULL CIRCLE
City-St-Zip: S. DAYTONA, FL 32119

Title: D (X) Delete
Name: DEWEES, PATRICIA
Address: 3787 CARRICK DR.
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: WEIGAND, FRED DR.
Address: 2670 DOYLE RD.
City-St-Zip: DELTONA, FL 32738

Title: SD (X) Change ( ) Addition
Name: DEWEES, PATRICIA
Address: 3787 CARRICK AVENUE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D (X) Change ( ) Addition
Name: GREEN, GARTH
Address: 125 GULL CIRCLE NORTH
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOYCE SHUMAKER PD 04/30/2008

Electronic Signature of Signing Officer or Director — Date